



The Arc of Gaston County is pleased to announce our **2018 Operation Santa program** to assist adults with developmental disabilities in our community during Christmas. We will be accepting Operation Santa requests from now until November 30, 2018. The form for each person in need is included on the back.

**To be eligible for this program you MUST:**

- ***Be 18 years or older***
- ***Be a Gaston County resident***
- ***Have a medical diagnosis of Intellectual or Developmental Disability***
- 

Please complete the enclosed form and be as detailed as possible. We need to fully understand all wish list items, as well as the person's "developmental/functional age" so appropriate items can be considered. (\*\*\*If Section 1 is not fully completed, the applicant will not be considered for assistance).

Return the completed form to The Arc of Gaston County **no later than Friday, 11/30.**

*\*\*\* Requests for Gift Cards will not be accepted \*\*\**

Completed forms may be mailed, faxed, or scanned/email to The Arc office:

**Address: The Arc of Gaston County 200 E. Franklin Blvd. Gastonia, NC 28052**

**Fax: 704-864-9464 · Email: [opsanta@gastoncountyarcc.org](mailto:opsanta@gastoncountyarcc.org)**

We are very thankful to offer this program to adults with developmental disabilities in our community. Please contact The Arc office with any questions.

Sincerely,

Sara Osborne, Director

704-861-1036, [arcgaston@bellsouth.net](mailto:arcgaston@bellsouth.net)



## OPERATION SANTA REQUEST

### SECTION 1 - ALL QUESTIONS MUST be completed for this applicant to be considered for assistance.

Name of person in need: \_\_\_\_\_ Address: \_\_\_\_\_

Phone/Email: \_\_\_\_\_ Age: \_\_\_\_\_ Race: \_\_\_\_\_ Gender: \_\_\_\_\_

Person completing this form: \_\_\_\_\_ Address (if different): \_\_\_\_\_

Relationship to person in need: \_\_\_\_\_ Phone/Email: \_\_\_\_\_

Specific Diagnosis of the person in need: \_\_\_\_\_

Developmental/Functional Age: (ex. - age 35 but is on 7 year old level) \_\_\_\_\_

Explain why assistance is needed: \_\_\_\_\_

List other organizations you are requesting assistance from: \_\_\_\_\_

### SECTION 2 - Information provided below are gift ideas. We will try to purchase items listed below or something similar based on availability and our budget. Please be specific/check boxes that apply.

**CLOTHING:** (BE SPECIFIC - mens/womens/girls/boys/tall/petite, accurate number or letter size— example: Men's Large, Girls 8)

Pants \_\_\_\_\_ ☐ Elastic Waist ☐ Buttons ☐ Zippers

Shirt \_\_\_\_\_ ☐ Pullover ☐ Buttons

Shoes \_\_\_\_\_ ☐ Laced ☐ Velcro ☐ Slip on Socks \_\_\_\_\_ ☐ Tall ☐ Footies

Undergarments \_\_\_\_\_ (boxer, brief, bikini cut, etc)

Favorite color \_\_\_\_\_ Favorite Team/Theme \_\_\_\_\_

Winter Items/Size (Coat, Hat, Scarf, Gloves) \_\_\_\_\_

**GIFTS/PERSONAL NEEDS:** (BE SPECIFIC)

Jewelry \_\_\_\_\_ ☐ Clip on earrings ☐ Pierced ears

Perfume/Cologne \_\_\_\_\_

Toys (Cars, Dolls, Pull String/Manipulatives, Musical, Puzzles/# of pieces, Books, Coloring, Games, Balls, etc.) \_\_\_\_\_

Personal Needs (Hairbrush, Shampoo, Conditioner, Deodorant, Lotion, Nail Polish, Hair bows, Toothbrush, Toothpaste, Soap— Please list if there is a specific brand needed) \_\_\_\_\_

**Please return the completed form to The Arc of Gaston County by Friday, November 30, 2018.**

Email to: [opsanta@gastoncountyarcs.org](mailto:opsanta@gastoncountyarcs.org) Fax to: 704-864-9464 Mail to: 200 E. Franklin Blvd. Gastonia, NC 28052

**\*\* Contact The Arc office with any questions at 704-861-1036 or [arcgaston@bellsouth.net](mailto:arcgaston@bellsouth.net) \*\***

## **2018 Operation Santa Program Application Reminders & Instructions**

The Arc of Gaston County's Operation Santa program helps adults with IDD ages 18 & up with items at Christmas. Thanks to area funding and volunteers, this program reached 125 local adults last year. The need is ever growing and we anticipate this number increasing this year.

### **Instructions**

#### **SECTION 1**

- ALL questions **must be completed** for the applicant to be considered for assistance.
- The personal information in this section is vital for our due diligence to ensure both who we are serving and how we are serving them. Having to call multiple people because details are not completed is very time consuming.
- Clarifications Needed:
  - Specific Diagnosis: list basic terms (Down Syndrome, Autism, etc), not medical abbreviations or Codes
  - Developmental/Functional Age: "45 but is on a 7 year old level"

#### **SECTION 2**

- Keep in mind this section is to provide gift ideas (needs and wants) for the applicant
- Be as specific as possible about their sizes, likes, preferences, etc.
- If there is an item a person really needs, please make a note on the application

*\*\*\*\*\* Please understand that we will do our best to get what's listed or something similar based on store availability as well as our budget. We are usually not able to purchase every item on each wish list since we are trying to serve as many people as possible but will make every effort to provide both needs and wants for each applicant \*\*\*\*\**